

Montana's Children's Autism Waiver (CAW) Report:

Initial Outcomes of Cohort One

(Executive Summary)

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In 2009, the Developmental Disabilities Program (DDP) within Montana's Department of Public Health and Human Services (DPHHS) began the Children's Autism Waiver (CAW) as way to provided intensive (20 hours a week), applied behavior analysis to young children with Autism Spectrum Disorders (ASD) and their families. The Medicaid waiver program is state-wide and provides services for 50 children at a time. The first cohort of children who have completed the services have just exited. As part of the exit procedure, a comprehensive evaluation was completed. The data presented below are some of the data, a more complete report is found in the full report.

CAW Participants:

- All children were diagnosed with autism and adaptive delays (e.g., delays in grooming, dressing, safety, personal responsibility, etc.) prior to program entry.
- The number of program slots were assigned by region based on that region's population.
- The average age of children served was 4.3 years of age.

CAW Services:

- Over the three years, the participants received an average of 16.04 hours per week of direct teaching implemented largely by a Children's Autism Trainer (CAT).
- Over the three years, the participants received an average of 2.1 hours per week of case management (e.g., services that assist the child and family in gaining needed medical, social, educational and other resources and supports).
- Over the three years, the participants received an average of 2.2 hours per week of Program Design and Monitoring supports (e.g., professionals who develop and provide training in individualized interventions used with the children).

CAW Outcomes:

Symptom Reduction

At exit,

- 84% of the participants reached a "best outcome" in at least one of the three components of the comprehensive outcome measure; the components of the measure are Childhood Autism Rating Scale (CARS) score, education placement, and community access.
- 48.6% of participants scored as non-autistic on the CARS, meaning that the child's autism symptoms have reduce significantly enough to no longer score in the clinical range (no longer exhibit symptoms that would result in an ASD diagnosis)
- 65% receive general education services
- 65% have full access to the community
- 77% no longer meet eligibility requirement for other DDP services

Functional Skills

- At exit, 72% of participants were toilet trained, an increase of 52% from the start of services.
- At exit, 80.5% of participants were verbal, an increase of 47.2% from the start of services.

CAW Family Outcomes:

75% of participating families were satisfied or very satisfied with the program.

Cost of Program:

The appropriation to DDP to serve the children in the CAW each year is \$2.1M with the State general fund portion being \$709,000. Reports from the billing system show that 91% of the total billed for CAW services went to direct core services and 9% went to purchase ancillary support services such as adaptive equipment and environmental modifications, respite, transportation and therapies.

Estimated projections from research suggest that the lifetime cost for an individual with ASD is \$3.2M, but with treatment, these costs can be reduced. Immediate savings from the CAW is realized through decreases in Special Education services as well as in the reduction in the number of participants now eligible for other DDP services. Additional savings such as reduction in costs related to parents missing work and reduction in costs for therapies or medical treatments are hard to determine but are expected to be substantial. Even the most conservative estimates would put the savings that result from CAW outcomes in millions of dollars.

Summary and Conclusion:

In summary, the first three years of the CAW and the first CAW cohort was incredibly successful. While challenges still exist and model development and training are still ongoing needs, the outcome measures are on par with published results from the best national programs.

The full report can be accessed on the DDP website Autism Information page at <http://www.dphhs.mt.gov/dsd/ddp/autism.shtml>